

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

RC PETITION

Case No.

01-RC-325633

Date Filed

9/13/2023

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer

Dartmouth College/Dartmouth College Board of Trustees

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

6001 Parkhurst Hall, Suite 11A
NH Hanover 03755

3a. Employer Representative – Name and Title

Nicholas DiGiovanni Esq.

3b. Address (If same as 2b – state same)

200 State Street, 11th Floor Suite 11A
MA Boston 02109

3c. Tel. No.

(617) 788-5008

3d. Cell No.

(617) 851-0101

3e. Fax No.

(617) 367-3125

3f. E-Mail Address

ndigiovanni@morganbrown.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Others

4b. Principal product or service

Education

5a. City and State where unit is located:

Hanover, NH

5b. Description of Unit Involved

Included:

Excluded:

6a. No. of Employees in Unit:

15

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes [☒] No [☐]

Check One:



7a. Request for recognition as Bargaining Representative was made on (Date) 9/11/2023 and Employer declined recognition on or about (Date) (If no reply received, so state). No reply received



7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Address

8c. Tel No.

8d Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____

(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
10/6; 10/12; 10/13

11c. Election Time(s):
9am-5pm

11d. Election Location(s):

Hanover NH

12a. Full Name of Petitioner (including local name and number)

John Stanley Krupski Esq.
Service Employees International Union, Local 560

12b. Address (street and number, city, state, and ZIP code)

109 North State Street, Suite 2
NH Concord 03301

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

Service Employees International Union

12d. Tel No.

(603) 410-6011

12e. Cell No.

(603) 856-6019

12f. Fax No.

(603) 505-4652

12g. E-Mail Address

jake@milnerkrupski.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

13b. Address (street and number, city, state, and ZIP code)

13c. Tel No.

13d. Cell No.

13e. Fax No.

13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Signature *J. Stanley Krupski*

Title

Date

09/13/2023 09:33:37 AM

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

Please fill all necessary fields on the form PRIOR to digitally signing. To make changes after the form has been signed, right-click on the signature field and click "clear signature." Once complete, please sign the form.

Attachment

Employees Included
Players Men's Basketball Team

Employees Excluded
managers and supervisors

DO NOT WRITE IN THIS SPACE	
Case	Date Filed